## 3.0 PATIENT/CLIENT EDUCATION AND COMMUNITY AWARENESS

- **3.1 Policy:** All MCH local jurisdictions must have Patient/Client Education and Community Awareness Activities.
- 3.2 Patient/Client Education and Community Awareness Requirements:
  - 3.2.1 Under the direction of the MCH Director, the agency must provide a coordinated local effort for patient/client education and community awareness and case finding activities for low-income, high-risk women of childbearing age, pregnant women, and children.
  - 3.2.2 The agency is responsible for a variety of patient/client education and community awareness activities that recognizes the diversity of effective approaches needed to serve California's heterogeneous population. These activities should include promoting other local programs to increase access to perinatal care and preventive health care services for children, such as Access for Infants and Mothers (AIM), the Healthy Families program for children, and integrated activities within the MCH Scope of Work, such as Prenatal Care Guidance.
  - 3.2.3 The agency must track client referrals to obtain unduplicated counts of those receiving patient/client education and community awareness services and summarize the results in the Annual Report.
  - 3.2.4 Each health jurisdiction must provide coordinated patient/client education and community awareness activities to:
    - Inform low-income pregnant women and women of childbearing age, other target groups, and the agencies that provide services to them of:
      - The need for early and continuing prenatal care.
      - The availability and sources of prenatal care.
      - The Medi-Cal application process.
    - Follow high-risk targeted Medi-Cal-eligible women to assist them in continuing prenatal care and to assist them in obtaining other needed services.

- Assist families with infants and children who are eligible to obtain state-funded health coverage through Medi-Cal, AIM, Healthy Families and Child Health and Disability Program (CHDP) so they can access appropriate medical care and meet the recommended preventive health visits for their child.
- 3.2.5 Patient/client education and community awareness, case finding, and care coordination activities shall be targeted to high-risk populations as identified in the jurisdiction's Five-Year MCH Plan. Priority is given to the following populations:
  - Low-income pregnant women.
  - Women, children, and adolescents who are not linked to a source of care.
  - Women of childbearing age who are at risk for adverse perinatal outcomes, including but not limited to, tobacco exposure and substance use.
- 3.2.6 The agency will promote community-wide collaboration in the development and implementation of patient/client education and community awareness programs, as well as work to assure that services are provided in a culturally sensitive manner and avoid duplication of services.
- 3.2.7 The agency must develop protocols and evaluation methods to measure the success of activities as they relate to the local MCH Plan and the Scope of Work.
- 3.2.8 The agency must keep a log of incoming calls and referrals to assist in evaluating utilization. This information is reportable in the M<CH Annual Report. Please refer to the Progress Report Requirements, Toll-Free Telephone Report (Form 6) in the Report Section, for necessary revised reporting requirements for the Annual Report.

## 3.3 Procedures:

- 3.3.1 Maintain documentation of activities on file (Refer to Audit Section of this manual).
- 3.3.2 Summarize activities and describe measures of success and outcomes/impact in the Annual Reports in accordance with current fiscal year Policies and Procedures.